



Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION 1180037
OIL & GAS CONSERVATION DIVISION

Form CP-4
March 2009

Type or Print on this Form
Form must be Signed
All blanks must be Filled

WELL PLUGGING RECORD
K.A.R. 82-3-117

OPERATOR: License #: _____
 Name: _____
 Address 1: _____
 Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Contact Person: _____
 Phone: (_____) _____
 Type of Well: (Check one) Oil Well Gas Well OG D&A Cathodic
 Water Supply Well Other: _____ SWD Permit #: _____
 ENHR Permit #: _____ Gas Storage Permit #: _____
 Is ACO-1 filed? Yes No If not, is well log attached? Yes No
 Producing Formation(s): List All (If needed attach another sheet)
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____
 _____ Depth to Top: _____ Bottom: _____ T.D. _____

API No. 15 - _____
 Spot Description: _____
 _____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West
 _____ Feet from North / South Line of Section
 _____ Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: _____
 Lease Name: _____ Well #: _____
 Date Well Completed: _____
 The plugging proposal was approved on: _____ (Date)
 by: _____ (KCC District Agent's Name)
 Plugging Commenced: _____
 Plugging Completed: _____

Show depth and thickness of all water, oil and gas formations.

Oil, Gas or Water Records		Casing Record (Surface, Conductor & Production)			
Formation	Content	Casing	Size	Setting Depth	Pulled Out

Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugging Contractor License #: _____ Name: _____
 Address 1: _____ Address 2: _____
 City: _____ State: _____ Zip: _____ + _____
 Phone: (_____) _____
 Name of Party Responsible for Plugging Fees: _____
 State of _____ County, _____, ss.
 _____ Employee of Operator or Operator on above-described well,
 (Print Name)

being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the same are true and correct, so help me God.

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202



PO Box 93999
 Southlake, TX 76092

Voice: (817) 546-7282
 Fax: (817) 246-3361

INVOICE

Invoice Number: 140413

Invoice Date: Dec 18, 2013

Page: 1

Bill To:
K & B Norton Oil & Inv. LLC 1209 W. Park Grove Dr. Manhattan, KS 66503-2469

Customer ID	Field Ticket #	Payment Terms	
Norton	54951	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS2-03	Russell	Dec 18, 2013	1/17/14

Quantity	Item	Description	Unit Price	Amount
1.00	WELL NAME	Becker #3		
138.00	CEMENT MATERIALS	Class A Common	17.90	2,470.20
92.00	CEMENT MATERIALS	Pozmix	9.35	860.20
7.91	CEMENT MATERIALS	Gel	23.40	185.09
50.00	CEMENT MATERIALS	Flo Seal	2.97	148.50
246.52	CEMENT SERVICE	Cubic Feet Charge	2.48	611.37
113.42	CEMENT SERVICE	Ton Mileage Charge	2.60	294.89
1.00	CEMENT SERVICE	Plug to Abandon	2,600.47	2,600.47
11.00	CEMENT SERVICE	Pump Truck Mileage	7.70	84.70
11.00	CEMENT SERVICE	Light Vehicle Mileage	4.40	48.40
1.00	CEMENT SUPERVISOR	Robert Yakubovich		
1.00	CEMENT SUPERVISOR	Glenn Ginther		
1.00	OPERATOR ASSISTANT	Joe Goodson		

Subtotal	7,303.82
Sales Tax	595.26
Total Invoice Amount	7,899.08
Payment/Credit Applied	
TOTAL	7,899.08

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 1,825.95

ONLY IF PAID ON OR BEFORE
 Jan 12, 2014

ALLIED OIL & GAS SERVICES, LLC 054951

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell KS

DATE <u>12-18-13</u>	SEC. <u>21</u>	TWP. <u>15</u>	RANGE <u>14</u>	CALLED OUT	ON LOCATION	JOB START <u>11:30 am</u>	JOB FINISH <u>12:00 pm</u>
LEASE <u>Becker</u>		WELL# <u>3</u>		LOCATION <u>Russell KS 9S 1/2 W 1/2</u>		COUNTY <u>Russell</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)				<u>N Winto</u>			

CONTRACTOR Shields
 TYPE OF JOB PTA
 HOLE SIZE 7 7/8 T.D. 3346
 CASING SIZE 8 5/8 DEPTH 413
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 16.6 DEPTH 3311
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER _____
 CEMENT AMOUNT ORDERED 230 60/40 490 gcl 1/4 7/10

EQUIPMENT
 PUMP TRUCK CEMENTER Robert V
 # 417 HELPER Glen G
 BULK TRUCK
 # 473 DRIVER Joe G
 BULK TRUCK
 # DRIVER

COMMON	<u>138</u>	@	<u>17.90</u>	<u>2470.20</u>
POZMIX	<u>92</u>	@	<u>9.35</u>	<u>860.20</u>
GEL	<u>7.91</u>	@	<u>23.40</u>	<u>185.07</u>
CHLORIDE		@		
ASC		@		
<u>5/16 50# 2 sk</u>		@	<u>2.97</u>	<u>148.50</u>
		@		
		@		
		@		
		@		
HANDLING	<u>246.52</u>	@	<u>2.48</u>	<u>611.36</u>
MILEAGE	<u>113.4155</u>	@	<u>2.60</u>	<u>294.88</u>
				TOTAL <u>4570.24</u>

REMARKS:
p1 50sk @ 3311
p2 25sk @ 910
p3 100sk @ 418
p4 10sk @ 40
30sk in Rat
15sk in Mouse

SERVICE

DEPTH OF JOB	<u>3311</u>		
PUMP TRUCK CHARGE	<u>2600.47</u>		
EXTRA FOOTAGE		@	
MILEAGE	<u>11 HWMT</u>	@	<u>7.70 84.70</u>
MANIFOLD		@	
<u>11 HWMT</u>		@	<u>4.40 48.40</u>
TOTAL <u>2733.57</u>			

CHARGE TO: KB Norton Oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

To: Allied Oil & Gas Services, LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL _____		

PRINTED NAME George Bealor
 SIGNATURE George Bealor

SALES TAX (If Any) _____
 TOTAL CHARGES 7303.81
 DISCOUNT 1825.95 IF PAID IN 30 DAYS
net \$ 5477.86